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## BIB DATA SHEET

CONFIRMATION NO. 7291

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.		
10/595,825	08/09/2006	604	4116	HUAHE-0007		
<b>RULE</b>						
<b>APPLICANTS</b> Limin Mu, Zhongshan City, CHINA; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/CN04/00924 08/10/2004 <b>** FOREIGN APPLICATIONS *****</b> CHINA 200320109812.7 11/21/2003 CHINA 200320109813.1 11/21/2003 CHINA 200420041883.2 05/09/2004 CHINA 200420042084.7 06/23/2004 <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> SMALL ENTITY ** 02/26/2007						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/IMANI N HAYMAN/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance <u>Initials</u>	<b>STATE OR COUNTRY</b> CHINA	<b>SHEETS DRAWINGS</b> 0	<b>TOTAL CLAIMS</b> 12	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> KNOBLE, YOSHIDA & DUNLEAVY EIGHT PENN CENTER SUITE 1350, 1628 JOHN F KENNEDY BLVD PHILADELPHIA, PA 19103 UNITED STATES						
<b>TITLE</b> Syringe for powder medicament premixing						
<b>FILING FEE RECEIVED</b> 515	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		